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TRANSMITTAL FORM

(To be used for all correspondence after initial filing)

| Patent Number | 6,803,042 | |
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| Issue Date | October 12, 2004 | _ |
| First Named Inventor | George H. Lowell | |
| Art Unit | 1645 | |
| Examiner Name | Robert A. Zeman | |
| Attorney Docket No. | 484112.409C2 | |

| ENCLOSURES (check all that apply) | | | | | | |
|--|-----------|-----------------------------------|--|-----------------------|-------|---|
| Fee Transmittal Form Fee Attached Amendment/Response After Final Affidavits/declaration(s) Extension of Time Request Express Abandonment Request Information Disclosure Statement and Transmittal Cited References Certified Copy of Priority Document(s) Response to Missing Parts under 37 CFR 1.52 or 1.53 Response to Missing Parts/Incomplete Application | | | Drawing(s) Request for Corrected Receipt Licensing-related Paper Petition Petition to Convert to a Provisional Application Power of Attorney, Revocation, Change of Correspondence Address Declaration Statement under 37 CF 3.73(b) Terminal Disclaimer Request for Refund CD, Number of CD(s) Landscape Table of | ers f ess FR | | After Allowance Communication to TC Appeal Communication to Board of Appeals and Interferences Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) Proprietary Information Status Letter Return Receipt Postcard Other Enclosure(s) (please Identify below): |
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| Signature | may | Joa | nu Rook | | | |
| Printed Name | Mae Joann | ne Rosc | ok | | | |
| Date September 2 | | r 22, 20 | 22, 2006 Reg. | | O. | 48,903 |
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REVOCATION OF POWER OF ATTORNEY WITH NEW POWER OF ATTORNEY AND CHANGE OF CORRESPONDENCE ADDRESS

| Patent Number | 6,803,042 | | |
|---------------------------|------------------|--|--|
| Issue Date ¹ • | October 12, 2004 | | |
| First Named Inventor | George H. Lowell | | |
| Art Unit | 1645 | | |
| Examiner Name | Robert A. Zeman | | |
| Attorney Docket Number | 484112.409C2 | | |

| I hereby revoke all previous powers of attorney given in the above-identified application. | | | | | | | |
|---|-----------------------|-------------------------|-----------------|-----------------|---------------------------------|-----------|-------|
| A Power of Attorney is submitted herewith. | | | | | | | |
| OR | | | | | | | |
| 🛛 I here | eby appoint t | he practitioners at See | ed IP Law Gro | up PLLC, Cust | omer N | Number: (|)0500 |
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| Telephone | | | Ema | 1 | | | |
| I am the: | | | | | | | |
| Applicant/Inventor. | | | | | | | |
| Assignee of record of the entire interest. See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96) | | | | | | | |
| As assignee of record of the entire interest I/we hereby elect, under 37 CFR 3.71, to prosecute the application to the exclusion of the inventor(s). | | | | | | | |
| SIGNATURE of Applicant or Assignee of Record | | | | | | | |
| Signature | | | | | | | |
| Name | Name ELIZABETH ARWINE | | | | | | |
| Date 11 SEPTEMBER 2006 | | | | | | | |
| NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below. | | | | | | | |
| Total of forms are submitted. | | | | | | | |

| STATE | MENT | UNDER | 37 CF | R 3.7 | 3(b) |
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| Applicant/Patent | Owner: _ | George H. Lowe |] | | | |
|--|-------------------------------|-----------------------|--|---|--|--|
| Application No./P | atent No.: _ | 6,803,042 | Filed/Issue Date: | October 12, 2004 | | |
| Entitled: ORA | L OR INTRA | NASAL VACCIN | IES USING HYDRO | PHOBIC COMPLEXES | | |
| HAVING PROTEOSOMES AND LIPOPOLYSACCHARIDES | | | | | | |
| *************************************** | | | | | | |
| Government Represented by (Na | | ry of the Army | | rernment agency ee, e.g., corporation, partnership, r, government agency, etc.) | | |
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| [NOTE: A separate copy (i.e., a true copy of the original assignment document(s)) must be submitted to Assignment Division in accordance with 37 CFR Part 3, if the assignment is to be recorded in the records of the USPTO. See MPEP 302.08] | | | | | | |
| | | | | t on behalf of the assignee. | | |
| Elye | weth f | fruine | | TEMBER Date | | |
| ELIZA | BETH | ARWINE | PATEN | TEMBER Date TATTORNEY Title | | |
| • | Typed or printed | name | | Title | | |